National Health Fund

2291. SHRI SATISH PRADHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have constituted a National Health Fund to provide medical assistance to the helpless and poor people;

(b) if so, the details thereof; and

(c) whether Government are considering to introduce community based Universal Health Insurance Scheme for the poor people so that all sections of the society get quality health care facility?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) On the recommendation of the Department related Parliamentary Standing Committee on Human Resources Development, a National Illness Assistance Fund was set up in 1997. Its name has now been changed as "Rashtriya Arogya Nidhi" vide Government's Resolution No. W. 11011/2/2003-NIAF dated 8.4.2003.

(b) The Rastriya Arogya Nidhi provides financial assistance to patients, living below poverty line, suffering from life threatening diseases, to receive medical treatment at any of the super-speciality Hospitals/ Institute or other Government Hospitals. The financial assistance is released in the form of 'one time grant'.

(c) A 'Universal Health Insurance Scheme' was launched on countrywide basis by the Prime Minister on 14th July, 2003.

Treatment of foreign patients

2292. SHRI SHAHID SIDDIQUI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether in the light of a number of patients from foreign countries wanting to avail health care facilities in India, Government have conducted a survey on further development of these opportunities;

(b) whether Government have taken any steps to develop Medical Tourism which is expected to fetch 10 thousand crore additional revenue by the year 2012; and

(c) whether Government are preparing a joint programme with the Ministries of Tourism an Civil Aviation to bring more tourists in the health sector?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) The Government is aware that certain hospitals in India are offering quality medical care in areas such as Cardiac Surgery, Ophthalmology etc. at a fraction of the cost incurred in developed countries. A report commissioned by the Confederation of Indian Industry in association with M/s Mskinsey has outlined the great potential for medical tourism in India due to a strong value preposition on cost, quality and services.

It is the endeavor of the government to provide quality medical care to all citizens and also to promote the use of quality facilities for treatment of needy patients from other countries. For this purpose, India is one of the few countries to have given a commitment for allowing foreign investments in the hospital sector with a cap on foreign equity to the extent on 51%. Foreign equity investment of upto 100% is allowed with FIPB clearance in the Hospital Sector. A new scheme has been introduced as per the new EXIM policy which provides for duty free imports equivalent of 10% of average foreign exchange earning in preceding three years by health service providers.

It is felt that as more and more investment comes into the hospital sector both from private and public sources, India's potential in medical tourism will continue to expand.

Separate OPD for CGHS beneficiaries

†2293. SHRI ABHAY KANT PRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to set up separate O.P.D. wings in the Lady Harding and Kalavati Bal Saran Hospital, Delhi for the C.G.H.S. Card holders;

(b) if so, the details thereof; and

(c) if not, the reasons therefor?

†Original notice of the question was received in Hindi.